

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: _____		2 Serial/Patent # <u>10/523805</u>	
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3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing	1	09 Feb 05	\$ 500
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$

	7 TOTAL AMOUNT OF REFUND <div style="text-align: right; font-size: 1.2em;">\$ 500</div>
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10 REASON: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	8 TO BE REFUNDED BY: <div style="border: 1px solid black; padding: 5px;"> Treasury Check Credit Deposit A/C #: <div style="display: flex; align-items: center;"> 9 <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">2</td> <td style="width: 20px; text-align: center;">--</td> <td style="width: 20px; text-align: center;">4</td> <td style="width: 20px; text-align: center;">8</td> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">0</td> </tr> </table> </div> </div>	0	2	--	4	8	0	0
0	2	--	4	8	0	0		
<input checked="" type="checkbox"/> Overpayment <input type="checkbox"/> Duplicate Payment <input type="checkbox"/> No Fee Due (Explanation): _____								

11 REFUND REQUESTED BY: _____ TYPED/PRINTED NAME: _____ SIGNATURE: <u>G. K. ...</u> OFFICE: _____ ***** THIS SPACE RESERVED FOR FINANCE USE ONLY: APPROVED: _____ DATE: _____	TITLE: <u>Paralegal</u> PHONE: <u>7033089140 Ext 214</u>
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Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: